24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)				PAGE 1 FOR SE OF	OF 5 FORM 24/48		
NAME OF COMMITTE (In Full)			EC ID	ENTIFICATION	ON NUMBER ▼		
SENATE CONSERVATIVES FUND			С	C00448696			
Check If 24-hour report					Y		
	Full Name (Last, First, Middle Initial) of Payee ASG Marketing						
				M M / D D / Y Y Y Y			
	Mailing Address 1600 Amphitheatre Pkwy	08 07 2012					
				Amount			
	City State Zip Code Mountain View CA 94043	Г.			3512.30		
				: SE.4452	Ctoto		
	Purpose of Expenditure Category/ IE-Mandel-Email List Rental Type 003	e Sought	:	House Senate	State: OH		
	Name of Federal Candidate Supported or Opposed by Expenditure:			President	District: 00		
		Check One: Support Oppose			Oppose		
	Dish	ursement		Drimorri	Canaval		
	for Office Sought 20636.55			Primary ecify)	General		
				►			
	Full Name (Last, First, Middle Initial) of Payee ASG Marketing Mailing Address 1600 Amphitheatre Pkwy						
			08 13 2012				
			Amount				
	City State Zip Code	Amount					
	Mountain View CA 94043			7	7922.15		
	Purpose of Expenditure Category/ Office	Transac e Sought		: SE.4453 House	State: OH		
	IE-Mandel-Email List Rental 003 Type 003		\times	Senate	District: 00		
	Name of Federal Candidate Supported or Opposed by Expenditure:			President	_		
	JOSH MANDEL Chec	ck One:	\times	Support	Oppose		
		ursement	For:	Primary	General		
	for Office Sought 29199.35 2012	Oth	er (spe	ecify)			
_ _							
(a) SUBTOTAL of Itemized Independent Expenditures							
(b) SUBTOTAL of Unitemized Independent Expenditures							
		=					
	(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
	Lisa Lisker				V - V		
	[Electronically Filed] Date 08	B /	14	201	2		
	Signature						